Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control nun

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/735,340			ing Date 12/2003	To be Mailed		
APPLICATION AS FILED – PART I (Column 1) (Column 2)									SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
	FOR	,	NUMBER FILED		NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)		
	BASIC FEE (37 CFR 1 16(a), (b),	or (c))	N/A		N/A		ı	N/A		1	N/A			
	SEARCH FEE (37 CFR 1 16(k), (i), a	or (m))	N/A		N/A		ı	N/A		1	N/A			
	EXAMINATION FE (37 CFR 1,16(o), (p),		N/A		N/A		1	N/A			N/A			
	TAL CLAIMS CFR 1.16(ii)		minus 20 =		•		l	x \$ =		OR	x s =			
IND (37	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 =		•			x \$ =		1	X \$ =			
	APPLICATION SIZE (37 CFR 1.16(s))	FEE she is \$2 add	If the specification and dra sheets of paper, the applii is \$250 (\$125 for small en additional 50 sheets or fra 35 U.S.C. 41(a)(1)(G) and			ication size fee due ntity) for each action thereof. See								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										1				
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		]	TOTAL			
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY						
AMENDMENT	05/31/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1.16())	* 37	Minus	<b>~</b> 37		= 0	ı	x s =		OR	X \$52=	0		
	Independent (37 CFR 1.16(h))	• 5	Minus	<del></del> 5		- 0		X \$ =		OR	X \$220=	0		
	Application Size Fee (37 CFR 1.16(s))													
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR				
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0		
(Column 1) (Column 2) (Column 3)														
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1,16())	•	Minus	:		-		X \$ =		OR	x s =			
	Independent (37 CFR 1.16(h))		Minus	***				X \$ =		OR	X \$ =			
	Application Size Fee (37 CFR 1.16(s))									]				
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						l			OR				
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.														

This collection of Information is equient by 37 CFR. 1.16. The Information is required to obtain or retain a brond fly the public which his is followed by the USETO to process at an application. Condificientity is governed by 30 LSR. 1.24 and 37 CFR. 1.4. This collection is estimated to their the 12 invitince to complete application form to the USETO. Time will vary depending upon the individual case. Any comments on the sensor of the required to complete the form and/or supposations for reducing this bruden, should be sent to the CHIEF (Information CRies, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 2213-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 2213-1450.